Earlier this year, Americans celebrated the 40th Anniversary of Medicare, the federal health insurance program for seniors and individuals with disabilities. Upon Medicare's inception, President Lyndon Johnson called it "a victory for America". I agree with President Johnson's sentiments, as Medicare has been a tremendously successful program that has helped lift millions of seniors out of poverty and into healthly retirements. When Medicare was first signed into law in 1965, the costs of doctor visits and hospital care were among the foremost concerns of older Americans. Since then, medical needs have evolved and prescription medicines have become a much more important part of healthcare for all Americans. For years, seniors have been demanding a real Medicare prescription drug benefit that is affordable, defined, and guaranteed - but their demands have fallen on deaf ears. Instead of heeding their straightforward requests to help them purchase more affordable medicines, Republicans served seniors with a confusing and illogical plan that does not adequately make medicines more affordable for beneficiaries.

I opposed this badly flawed Republican prescription drug plan, which was signed into law in 2003, because it was confusing and illogical, and did not do enough to make medicines more affordable for Medicare recipients. For example, the new law outrageously prohibits the Secretary of Health and Human Services from negotiating lower drug prices on behalf of the 40 million seniors enrolled in Medicare, even though similar types of negotiations currently in practice at the Veterans Administration (VA) saves them over 40% on many medicines. Instead, I supported a different law, one that would simply add a prescription drug benefit to the existing Medicare program, and look similar to the Medicare program that seniors already knew. Unfortunately, that proposal was not accepted, and the Republican plan is now current law.

Because this is the law, seniors need to take the time to learn about its provisions and decide for themselves whether or not they should enroll. This past Monday, Congressman Ben Cardin and I hosted a town hall meeting at Clinton Nursing and Rehabilitation Center to pass along critical information about this program to concerned seniors.

Enrollment for the new Medicare prescription drug plans begins November 15 and ends on May 15, 2006. The benefit will go officially goes into effect on January 1. In Maryland alone, there are 19 different companies offering 47 different plans with monthly premiums that vary from \$6.44 to \$68.91, as well as a Medicare managed care option called Medicare Advantage. Seniors who are eligible, and do not already have comparable prescription drug coverage, may face a penalty if they do not sign up by May 15. If you have comparable coverage, however, this penalty does not apply so you should examine your current benefits carefully.

Seniors should remember that, this year, they have until May 15, 2006 to enroll, so although it's

important to get started in their research, they should take their time and be cautious. They should examine the available plans and make their decisions based on what type of coverage they need and what plan they can afford. Low-income beneficiaries may be eligible for extra assistance to pay for their share of the costs and should apply with the Social Security Administration if they think they may qualify (1-800-772-1213 or www.ssa.gov/prescriptionhelp).

To receive information directly from the Centers for Medicare and Medicaid Services, you can call 1-800-MEDICARE or log on to www.medicare.gov. Seniors can also receive one-on-one personalized counseling from representatives at the State Health Insurance Assistance Program.